

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

COVER PAGE

Please type or print in ink.

A PUBLIC DOCUMENT

NAME OF FILER (LAST)	(FIRST)	2010 00	(MIDDLE)
Maharidge	Amy	Susan	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)		1 (1 °)	
Department of Conservation	· · · · · · · · · · · · · · · · · · ·		
Division, Board, Department, District, if applied		Your Position	
Division of Oil, Gas and Geothern	nal Resources	Engineering Geologist	
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)			
Agency:	·	Position:	
2. Jurisdiction of Office (Check at le	ast one box)		
▼ State		☐ Judge or Court Commissioner (State	tewide Jurisdiction)
Multi-County		County of	·
City of		Other	
3. Type of Statement (Check at least	one box)		
Annual: The period covered is January December 31, 2018.	/ 1, 2018, through	Leaving Office: Date Left(Check one	
The period covered is December 31, 2018.	/, through	 The period covered is January -or- 	1, 2018, through the date of
Assuming Office: Date assumed		The period covered is the date of leaving office.	, through
Candidate: Date of Election	and office sought, if dif	ferent than Part 1:	
4. Schedule Summary (must com	unlete) > Total number of	pages including this cover pag	ya: 1
Schedules attached	proto, Protar number of p	Jayes including this cover pag	y e
Schedule A-1 - Investments – sche	dule attached Sci	nedule C - Income, Loans, & Business	Positions – schedule attached
☐ Schedule A-2 - Investments – schedule attached ☐ Schedule D - Income – Gifts – schedule attached			
☐ Schedule B - Real Property – schedule attached ☐ Schedule E - Income – Gifts – Travel Payments – schedule attached			
-or- □ None - No reportable intere	sts on any schedule		
5. Verification	•		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public D	Occument)	STATE	ZIP CODE
27 Paseo Verde	San Clemente	cA CA	92673
DAYTIME TELEPHONE NUMBER		IL ADDRESS	
(714) 329-0030		ny.maharidge@conservation.c	
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.			
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Date Signed 02/14/2019	Signa	ture Mary Mah	C
(month, day, year)		(File the originally signed paper stat	ement with your filing official.)